UNITED STATES DISTRICT COURT

for the

Northern District of California					
WESTON REED, individually and on behalf of all others similarly situated,					
Plaintiff(s)					
V.	Civil Action No.				
MOLINA HEALTHCARE, INC. and CR INSURANCE GROUP, LLC					
Defendant(s)					
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address)					
See Attachment A.					
A lawsuit has been filed against you. Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Frederick J. Klorczyk III BURSOR & FISHER, P.A. 888 Seventh Avenue New York, NY 10019					
If you fail to respond, judgment by default will be en You also must file your answer or motion with the court.	ntered against you for the relief demanded in the complaint.				
	CLERK OF COURT				
Date:					
	Signature of Clerk or Deputy Clerk				

Attachment A:

MOLINA HEALTHCARE, INC. 200 Oceangate, Suite 100 Long Beach, CA 90802

CR INSURANCE GROUP, LLC 2671 NW 28th Street Miami, FL 33142

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PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

was rec	This summons for (n ceived by me on (date)	ame of individual and title, if an				
	☐ I personally serve	ed the summons on the ind	<u> </u>			
			on (date)	; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who resides there,					
	on (date), and mailed a copy to the individual's last known address; or					
	\square I served the summons on (name of individual) , who					
	designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sun	nmons unexecuted because			; or	
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total	of \$	0.00	
	I declare under penalty of perjury that this information is true.					
Date:						
			Server's signature			
		_	Printed name and title			
		_	Server's address			

Additional information regarding attempted service, etc: